

# Index of Claims



Application/Control No.

10/678,639

Examiner

Lynn Bristol

Applicant(s)/Patent under Reexamination

HE ET AL.

Art Unit

1643

|   |          |
|---|----------|
| ✓ | Rejected |
| = | Allowed  |

|   |                                |
|---|--------------------------------|
| — | (Through numeral)<br>Cancelled |
| + | Restricted                     |

|   |              |
|---|--------------|
| N | Non-Elected  |
| I | Interference |

|   |          |
|---|----------|
| A | Appeal   |
| O | Objected |

| Claim |          | Date    |  |  |  |  |  |  |  |  |  |
|-------|----------|---------|--|--|--|--|--|--|--|--|--|
| Final | Original | 1/13/08 |  |  |  |  |  |  |  |  |  |
|       | 1        | -       |  |  |  |  |  |  |  |  |  |
|       | 2        | -       |  |  |  |  |  |  |  |  |  |
|       | 3        | -       |  |  |  |  |  |  |  |  |  |
|       | 4        | -       |  |  |  |  |  |  |  |  |  |
|       | 5        | -       |  |  |  |  |  |  |  |  |  |
|       | 6        | -       |  |  |  |  |  |  |  |  |  |
|       | 7        | -       |  |  |  |  |  |  |  |  |  |
|       | 8        | -       |  |  |  |  |  |  |  |  |  |
|       | 9        | -       |  |  |  |  |  |  |  |  |  |
|       | 10       | -       |  |  |  |  |  |  |  |  |  |
|       | 11       | -       |  |  |  |  |  |  |  |  |  |
|       | 12       | -       |  |  |  |  |  |  |  |  |  |
|       | 13       | -       |  |  |  |  |  |  |  |  |  |
|       | 14       | -       |  |  |  |  |  |  |  |  |  |
|       | 15       | -       |  |  |  |  |  |  |  |  |  |
|       | 16       | -       |  |  |  |  |  |  |  |  |  |
|       | 17       | -       |  |  |  |  |  |  |  |  |  |
|       | 18       | -       |  |  |  |  |  |  |  |  |  |
|       | 19       | -       |  |  |  |  |  |  |  |  |  |
|       | 20       | -       |  |  |  |  |  |  |  |  |  |
|       | 21       | -       |  |  |  |  |  |  |  |  |  |
|       | 22       | -       |  |  |  |  |  |  |  |  |  |
|       | 23       | -       |  |  |  |  |  |  |  |  |  |
|       | 24       | -       |  |  |  |  |  |  |  |  |  |
|       | 25       | -       |  |  |  |  |  |  |  |  |  |
|       | 26       | -       |  |  |  |  |  |  |  |  |  |
|       | 27       | -       |  |  |  |  |  |  |  |  |  |
|       | 28       | -       |  |  |  |  |  |  |  |  |  |
|       | 29       | -       |  |  |  |  |  |  |  |  |  |
|       | 30       | -       |  |  |  |  |  |  |  |  |  |
|       | 31       | ✓       |  |  |  |  |  |  |  |  |  |
|       | 32       | ✓       |  |  |  |  |  |  |  |  |  |
|       | 33       | -       |  |  |  |  |  |  |  |  |  |
|       | 34       | ✓       |  |  |  |  |  |  |  |  |  |
|       | 35       | -       |  |  |  |  |  |  |  |  |  |
|       | 36       | ✓       |  |  |  |  |  |  |  |  |  |
|       | 37       | ✓       |  |  |  |  |  |  |  |  |  |
|       | 38       |         |  |  |  |  |  |  |  |  |  |
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|       | 49       |         |  |  |  |  |  |  |  |  |  |
|       | 50       |         |  |  |  |  |  |  |  |  |  |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
|       | 51       |      |  |  |  |  |  |  |  |  |  |
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|       | 100      |      |  |  |  |  |  |  |  |  |  |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
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|       | 127      |      |  |  |  |  |  |  |  |  |  |
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|       | 130      |      |  |  |  |  |  |  |  |  |  |
|       | 131      |      |  |  |  |  |  |  |  |  |  |
|       | 132      |      |  |  |  |  |  |  |  |  |  |
|       | 133      |      |  |  |  |  |  |  |  |  |  |
|       | 134      |      |  |  |  |  |  |  |  |  |  |
|       | 135      |      |  |  |  |  |  |  |  |  |  |
|       | 136      |      |  |  |  |  |  |  |  |  |  |
|       | 137      |      |  |  |  |  |  |  |  |  |  |
|       | 138      |      |  |  |  |  |  |  |  |  |  |
|       | 139      |      |  |  |  |  |  |  |  |  |  |
|       | 140      |      |  |  |  |  |  |  |  |  |  |
|       | 141      |      |  |  |  |  |  |  |  |  |  |
|       | 142      |      |  |  |  |  |  |  |  |  |  |
|       | 143      |      |  |  |  |  |  |  |  |  |  |
|       | 144      |      |  |  |  |  |  |  |  |  |  |
|       | 145      |      |  |  |  |  |  |  |  |  |  |
|       | 146      |      |  |  |  |  |  |  |  |  |  |
|       | 147      |      |  |  |  |  |  |  |  |  |  |
|       | 148      |      |  |  |  |  |  |  |  |  |  |
|       | 149      |      |  |  |  |  |  |  |  |  |  |
|       | 150      |      |  |  |  |  |  |  |  |  |  |